| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | 155243 | A. BUILDING _____ B. WING _____ | C 09/27/2011 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| KINDRED TRANS CARE AND REHAB-GREATER LAFAYETTE | 300 WINDY HILL DRIVE LAFAYETTE, IN 47905 |

| (X4) ID PREFIX TAG | SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) | ID PREFIX TAG | PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) | (X5) COMPLETION DATE |
|---|---|---|---|---|
| F 000 | INITIAL COMMENTS<br><br>This visit was for the investigation of complaint number IN00096416.<br><br>This visit was in conjunction with a Post Survey Revisit (PSR) to the Recertification and State License Survey completed on August 1, 2011.<br><br>Complaint Number IN00096416<br>Unsubstantiated, due to lack of evidence<br><br>Survey Dates: September 26 & 27, 2011<br><br>Facility Number: 000147<br>Provider Number: 155243<br>AIM Number: 100266900<br><br>Survey Team: Linda Campbell, RN<br><br>Census Bed Type:<br>SNF/NF: 138<br>Total: 138<br><br>Census Payor Type:<br>Medicare: 29<br>Medicaid: 82<br>Other: 27<br>Total: 138<br><br>Sample: 3<br><br>Kindred Transitional Care and Rehab-Greater Lafayette was found to be in compliance with 42 CFR Part 483, Subpart B and 410 IAC 16.2 in regard to the investigation of complaint number IN00096416.<br><br>Quality review completed 9/27/11 | F 000 | | |

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
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| KINDRED TRANS CARE AND REHAB-GREATER LAFAYETTE | 300 WINDY HILL DRIVE LAFAYETTE, IN 47905 |

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|---|---|---|---|---|
| F 000 | Continued From page 1<br>Cathy Emswiller RN | F 000 | | |